

Applicant:	Yousef Al-Abed and Kevin J. Tracey		
Application No.:	10/574,612	Group:	1625
371(c) Date:	June 15, 2006	Examiner:	Zinna Northington Davis
Confirmation No:	4212		
For:	ISOXAZOLE AND ISOTHIAZOLE COMPOUNDS USEFUL IN THE TREATMENT OF INFLAMMATION		

Sir:

☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	36	MINUS	* 36	0
INDEP	5	MINUS	** 5	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY			OTHER THAN SMALL ENTITY		
	RATE	ADDIT. FEE		RATE	ADDIT. FEE
X	\$ 26	\$	X	\$52	\$
X	\$110	\$	X	\$220	\$
+	\$195	\$	+	\$390	\$

* not fewer than 20
** not fewer than 3

TOTAL = \$ 0 TOTAL = \$ 0

The Application Size Fee has been calculated as shown below:*(Effective for cases filed on or after December 8, 2004)*

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)
56	100	0

SMALL ENTITY		OTHER THAN SMALL ENTITY	
Rate	Total Amount Owed	Rate	Total Amount Owed
X \$135	\$[]	X \$270	\$[]

Payment Sufficient for up to
100 Sheets

Petition for Extension of Time

- ☒ Applicant hereby petitions to extend the time to respond to the Restriction Requirement dated May 14, 2009 for one month(s) from June 14, 2009 to July 14, 2009. The appropriate fee is set forth below.
- ☐ *[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]*

Please charge Deposit Account No. 08-0380 for the following fees:

<input checked="" type="checkbox"/>	Petition for one month Extension of Time	\$ 130.00
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
	TOTAL:	\$ 130.00

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
	TOTAL:	\$ _____

- ☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By /Alexander Akhiezer, Reg. No. 54,617/
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Concord, Massachusetts 01742-9133
Dated: July 14, 2009